

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:						
Estimated average	ge burden					
hours per respon	se16.00					

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SEC USE ONLY							
Prefix		Serial					
DATE RECEIVED							

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Germantown Madison Square, LLC	PD00500
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4	(6) Intoe The Cooperation (6) Into (6)
Type of Filing:	APT 17 papa
A. BASIC IDENTIFICATION DATA	2
Enter the information requested about the issuer	THOMSON
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	and the state of t
Germantown Madison Square, LLC, a Tennessee limited liability company	
Address of Executive Offices (Number and Street, City, State, Zip Code	Telephone Number (Including Area Code)
2206 21st Avenue South Nashville, TN 37212	(615) 498-7168
Address of Principal Business Operations (Number and Street, City, State, Zip Cod	e) Telephone Number (Including Area Code)
(if different from Executive Offices)	
Brief Description of Business	
To develop and sell townhouses under a condominium regime	A SECENCY CO
Type of Business Organization	C OLT O ROUG >
corporation limited partnership, already formed other	r (please specify):
business trust limited partnership, to be formed	
Month Year	45 203 37
return of Estimated Suite of Inter-portation of Significant [U 3]	stimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for S	
CN for Canada; FN for other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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SEC 1972 (6-02)

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A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or ■ Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) White, Aaron Business or Residence Address (Number and Street, City, State, Zip Code) 2206 21st Ave South, Nashville, TN 37212 Beneficial Owner Promoter Executive Officer General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Deutschmann, Mark Business or Residence Address (Number and Street, City, State, Zip Code) 2206 21st Ave South, Nashville, TN 37212 Executive Officer General and/or ✓ Beneficial Owner Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Connelly, Hunter Business or Residence Address (Number and Street, City, State, Zip Code) 2206 21st Ave South, Nashville TN 37212 General and/or Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer General and/or Promoter Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Director General and/or Promoter Beneficial Owner Executive Officer Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

					B. IN	FORMATI	ON ABOUT	r offerin	īG				
			, or does th		tomd to n-11	l to non	oraditad :-	wastors in	this offeri	ng?		Yes	No 😿
ì.	Has the	issuer sold	, or does th			i, to non-ac Appendix,					••••••	1	
2.	Whatis	the minim	ım investm									\$_25,0	00.00
۷.												Yes	No
3.			ermit joint									K	
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such												
	a brokei	or dealer,	you may se	t forth the	information	on for that	broker or o	lealer only					
Fu	II Name (1	Last name t	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)						
Na	me of Ass	sociated Br	oker or Dea	aler		7				"			<u> </u>
Sta	ites in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers						
	(Check	"All States	" or check	individual	States)							A1	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA
	RI	<u>sc</u>	[30]							البيت			
Fu	II Name (Last name	first, if indi	ividual)									
Bu	isiness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Na	ame of As	sociated Bi	oker or De	aler					······································				
St	ates in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers	-	· 				
	(Check	"All State:	s" or check	individual	States)	•••••		•••••				☐ Al	1 States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Fı	ıll Name (Last name	first, if ind	ividual)								-	
B	usiness o	r Residence	e Address (Number ar	ıd Street, C	City, State,	Zip Code)						
N	ame of As	sociated B	roker or De	aler	· · · · · · · · · · · · · · · · · · ·								
St	ates in W	hich Person	n Listed Ha	s Solicited	or Intend	s to Solicit	Purchasers						
٠,			s" or check								•••••	A	Il States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
		IN	IA	KS	KY	LA	ME	MD	MA ND	MI OH	MN OK	MS OR	MO PA
	MT	NE SC	NV [SD]	NH	NJ	NM IIT	NY VT	NC VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check		
	this box and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity		
	Common Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests		\$ 200,000.00
	Other (Specify)	\$	<u></u>
	Total	\$ 1,000,000.00	\$ 200,000.00
		<u> </u>	
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	;	Agamagata
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	3	\$_200,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	S .	
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504	-	\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 7,500.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total		\$_7,500.00

	C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPENSES AND USE OF PI	ROCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — C proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross		\$
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part of the proceeds to the set of the increase of the proceeds to the increase of the proceeds to the issuer set forth in response to Part of the proceeds to the increase of the proceeds to the proceeds to the proceeds to the proceed of the proceeds to the proceeds to the proceed of the proceeds to the proceeds of the proceed of the proceeds to the proceed of the proceeds of the proceed of the proceed of the proceed of the proceeds of the proceed of the p	purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[\$_152,500.0C	<u></u> \$
	Purchase of real estate	[\$
	Purchase, rental or leasing and installation of machand equipment]\$	\$
	Construction or leasing of plant buildings and faci	lities] \$	\$_840,000.00
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asset issuer pursuant to a merger)	ne of securities involved in this ts or securities of another		
	Repayment of indebtedness			
	Working capital			
	Other (specify):		\$	\$
		[\$	\$
	Column Totals	[\$ <u>152,500.00</u>	\$ 840,000.00
	Total Payments Listed (column totals added)		\$ <u></u> 99	92,500.00
		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the mature constitutes an undertaking by the issuer to furner information furnished by the issuer to any non-accr	nish to the U.S. Securities and Exchange Commis	sion, upon writte	le 505, the following n request of its staff
Iss	uer (Print or Type)	Signature	Date /-	
(Germantown Madison Square, LLC, a Tennessee li	Auduth	9/29/2	006
Na	ame of Signer (Print or Type)	Title of Signer (Print or Type)		
Α	aron White	President		

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- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE							
1.	Is any party described in 17 CFR 230.262 pre provisions of such rule?	esently subject to any of the disqualification Yes No							
	See A	Appendix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.								
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.								
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.								
	ner has read this notification and knows the content thorized person.	nts to be true and has duly caused this notice to be signed on its behalf by the undersigned							
Issuer (Print or Type)	Signature Date							
Germa	antown Madison Square, LLC, a Tennessee lir	A celute 9/21/06							
Name (Print or Type)	Title (Print or Type)							
Aaror	White	President							

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1	Intend to non-a	to sell ccredited s in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Al	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No	(rait C-item 1)	Number of Accredited Investors	Amount	C-Item 2) Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ	J								
AR									
CA		. !							
СО									
СТ	and the state of t						,		
DE									
DC									
FL									
GA									
ні									
ID									
IL									
IN									
IA									
KS									
KY								T	
LA									
ME									,
MD									
MA			-						
MI									
MN									
MS									

APPENDIX

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1	investors	to sell	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
ОК									
OR									
PA									
RI									
SC									
SD									<u> </u>
TN		×		3	\$200,000.00				×
TX		×							×
UT									
VT									
VA									
WA									
wv									
WI									
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APPENDIX

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	APPENDIX										
1	1 2 3 4								5 Disqualification		
	to non-a	I to sell accredited as in State	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				attach attach attion of granted)		
State	Yes	No No	(rait C-itom 1)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY											
PR											